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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/211,781 06/15/2000  
 and claims benefit of 60/211,782 06/15/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 08/13/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MO	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 70	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

28940

## TITLE

HETEROARYLALKANOIC ACIDS AS INTEGRIN RECEPTOR ANTAGONISTS

<b>FILING FEE RECEIVED</b> 2280	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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